**Duplicate Renewal Notice** – a request for a duplicate renewal notice may be sent to the Board by one of the options listed below. Clearly state you are requesting a <u>Duplicate Renewal Notice</u>, and include:

- 1. Name
- 2. address
- 3. license number
- 4. email address or FAX number

This information may be sent by:

- FAX to (916) 263-2140
- email to <u>DentalBoard@dca.ca.gov</u>
- postal mail to Dental Board of California 1432 Howe Ave. #85 Sacramento, CA 95825-3241.